



# PARENT/SUPPORTIVE ADULT VISITATION RECORD AND OBSERVATION FORM

## CHILD PROTECTIVE SERVICES (CPS) - PERMANENCY AND CONSERVATORSHIP

**Purpose:** Use this form to document supervised visits.

**Instructions:** To complete this form, indicate the case specific information and respond to the questions provided. When indicating whether a behavior occurred during a visit, the observer must describe the behavior observed.

**Directions:** After completing this form, ask the parent(s) or adult(s) to respond to the questions on the last page and sign the form. (If the parents are visiting together and prefer to answer the questions at the end of the form separately, provide them a copy of page 2, and attach to the form.) Once the parent has signed the form, provide a copy of the form to the parent and file the form in the case file.

**Contract Providers:** Follow any directions related to the visit provided to you by the referral form. Complete the form and provide to the caseworker. The caseworker is responsible for reviewing the form with the parent, obtaining feedback and signatures and providing a copy of the form to the parent.

Questions about the form can be directed to the supervisor of the case.

### VISIT INFORMATION

Case Name:		Date of Visit:
Visit Location and Setting (i.e. park, CPS Office, CPS visitation room, McDonalds):		
DFPS Caseworker:	DFPS Supervisor:	DFPS Observer/Job Title:
Scheduled Appointment Time:	Actual Start Time:	End Time:
If the parent(s)/adult(s), child or the observer were late, did not show up for the visit, the visit was cancelled, or the visit ended early please explain why:		

### VISIT PARTICIPANTS

Children's Names	Children's Ages	Adult's Names	Relationship to Child (parent, grandparent, fictive kin, other)

### VISITATION/OBSERVATION DETAILS

Behavior	Details (Please check yes or no, and provide a few brief words explaining your choice)
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Did the parent/adult present any negative behaviors at the beginning of the visit? (Examples include: Parent/Adult intoxicated, shouting, screaming or overly hostile with staff)	<input type="checkbox"/> Yes <input type="checkbox"/> No  Describe:
Did the parent/adult and child respond to each other in an encouraging way at the beginning of the visit? (Examples include: Parent/Adult and child appeared interested and pleased to see each other; or the parent/adult and child engaged in appropriate physical contact such as hugs or kisses, unless specifically ordered not to by the courts or caseworker.)	<input type="checkbox"/> Yes <input type="checkbox"/> No  Describe:
Was the parent/adult able to manage and redirect the child's behavior? (Examples include: Parent/Adult did not use physical discipline, set consequences for inappropriate behaviors or attempt to calm the child when he/she became upset.)	<input type="checkbox"/> Yes <input type="checkbox"/> No  Describe:
Did the parent/adult address the child's physical needs? (Examples include: Parent/Adult brought food if it was meal time; brought age appropriate items such as clothes or toys; or changed diapers/respond to requests for going to the bathroom.)	<input type="checkbox"/> Yes <input type="checkbox"/> No  Describe:
Did the parent/adult address the child's emotional needs? (Examples include: Parent/Adult praised or comforted the child, or appeared to listen when child was talking to him/her?)	<input type="checkbox"/> Yes <input type="checkbox"/> No  Describe:
Did the visit end in an encouraging way? (Examples include: Parent/Adult showed positive emotion toward visiting the child, expressed optimism and excitement about the next visit, or focused on the child's needs/emotions.)	<input type="checkbox"/> Yes <input type="checkbox"/> No  Describe:
Prior to the visit, did the caseworker communicate his/her expectations to the visitation observer?	<input type="checkbox"/> Yes <input type="checkbox"/> No  Describe:
Were visit expectations followed?	<input type="checkbox"/> Yes <input type="checkbox"/> No  Describe:

### NOTES FROM THE PARENTS

Did your caseworker share the visitation expectations and the *Important Information for Parents about Visitation* with you during the development of the visitation plan or prior to visiting?

Please describe how the visit went:

Do you have any questions or concerns about the recorded information? If so, please list below:

Do you have anything you would like to add about the visit?

### SIGNATURES

**Your signature does not indicate that you agree with the observer's assessment, only that you have had an opportunity to review & ask questions about the form.**

Observer's Signature:

X

Date Signed:

Child's Parent or Legal Guardian:

X

Date Signed:

Child's Parent or Legal Guardian:

X

Date Signed: